CATION FEE OF FERWINATION RECORD - Effective October 1, 2001

09751422

CLAIMS A	S FILED - PART	1	SMALL EN	1TITY	OTHE	RTHAN
TOTAL CLAIMS	(Column 1)	(Column 2)	TYPE [OTHER THAN R SMALL ENTITY	
			RATE	FEE	RATE	FEE
FOR	COMBERINED	NUMBER EXTRA	BASIC FEE	370 00 C	BASIC FEE	740 00
OTAL CHARGEABLE: CLAIM:	minus 20±		X\$ 9::-	o	R X\$18=	
IDEPENDENT CLAIMS	minus 3 =		X42=		R X84=	
ULTIPLE DEPENDENT CLAIMP	RESENT		140	- J	``	
f the difference in column 1 is	less than zero, enter	*0" in column 2	1140=		L	
,	MENDED - PAR		TOTAL		,	
(Column 1)	(Colum		SMALLE	NTITY OF	OTHER SMALL	
COAIMS REMAINING	HIGH NUME	EST		ADDI-		ADDI
AMENDMENTA	PAID			FEE	- PATE	TIONAL
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	Migus .	6 -	X42=	OF OF	V0.4.5	
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A STATE OF THE STA	and the second s		TOTAL		TOTAL	
(Column 1)	NAME OF STREET	n 2) . (Column 3)	ADDIT FEE	- I®R	ADDIT FEEL	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
CLAIMS REMAINING	HIGHE	ST		ADDI-/		ADDI.
AFTER AMENDMENT	/ PREVIOUS PAID F	USLY EXTRA		IONAL FEET	RATE	TIONAL
Total 32	Minus	4	X\$ 9=	OR	X\$18=	View A
Independent	Minus A	64. 2	X42=	ÖÄ		~14 Cz
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			+140≘" F*	OR	*+280≅**	
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Independent .	Minus ***		X42=	OR.	X84=	
Carrest of the Carrest of the	and Elockender III		140=		+280=	
If the entry in column it is less than the	entry, in column 2, write 1	o in column 3	TOTAL	OR.	TOTAL	
If the "Highest Number Previously Pale" I the Highest Number Previously Pale	For IN THIS SPACE IS I	ess than 20, enter "20."	ADDIT. FEE	OR	ADDIT FEE	Potente with

PATENT APPLICATION FEE DETERMINATION RESORDVAIL ABLE COPY Effective October 1, 2000

1100-1130101

CLAIMS AS FILED - PART I (Column 1)					(Column 2)		SMALL ENTITY TYPE			OTHER SMALL		
TOTAL CLAIMS		115	/				RATE	FEE		RATE	FEE	
FOR		NUMBER I	BER FILED NUMB		ER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00	
то	TAL CHARGEA	BLE CLAIMS	4/4 min	nus 20=	us 20= * 7.4			X\$ 9=	N. S. C.	\ OR	X\$18=	E A
IND	DEPENDENT CL	_AIMS	6 mir	nus 3 =	= 2			X40=		17/	X80=	
MU	ILTIPLE DEPEN	DENT CLAIM P	RESENT							OR A	1.00 m	₹40°.
* If		in column 1 is LAIMS AS A (Column 1)		1	24%) RT II	column 2		+135= TOTAL	Xuiv		+270== AUOVAL OTHER	
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NON	Total 🗼 🛶		Minus			=		XX2		(A)	E0.000	
AME	Independent FIRST PRESE		Minus ULTIPLE DEP	ENDEN	r'CLAIM			XXC		OR OR	XXXX	
		(Column 1)		(Colur		(Column 3)	100		and the second		Aloni de	
AMENDMENT		REMAINING AFTER AMENDMENT		PREVIO	MBER OUSLY FOR	PRESENT		RATE	ADDIDA TICNAL AFFE		RAIÉ.	ADDE!
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ME	Independent	•	Minus	***		=]		do Ales M	őŘ.	AYRO_A	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	ENDENT	CLAIM]	X40≘ +135=		OR OR	+270=	
l	If the "Highest Nun If the "Highest Nur	mn 1 is less than th mber Pr viously Pa mber Previously Pa nber Previously Pai	aid For IN THIS ald F r IN THIS	S SPACE I	is less than	n 20, enter "20 In 3, enter "3."	0." /	TOTAL ADDIT. FEE		OR	ADDIT FEE	